



ASSIGNMENT/AUTHORIZED SIGNER FORM

Date _____

The following individual, having met the requirements for a contractor’s license/registration, hereby requests that the license/registration be assigned to the business concern indicated.

The license/registration is to be granted to engage in business as a _____ contractor, as per Chapter 33 or 41 of the Columbus City Code, 1959, as applicable. The individual herein shall be associated with the business concern full-time as a *bona fide* officer, proprietor, partner, or employee. The individual will be actively engaged in and perform work only for the business concern to which his/her license/registration has been assigned. **Only persons listed on this form with signatures attached, shall be authorized to sign permit applications.**

The following information shall be furnished and the following section shall be completed in full. List yourself on the appropriate line. **Have all authorized persons who sign permit applications sign on the line adjacent to their printed name.**

(PLEASE CHECK ONE) ☐ CORPORATION ☐ COMPANY ☐ PARTNERSHIP ☐ INDIVIDUAL

FULL NAME OF BUSINESS TO WHICH LICENSE/REGISTRATION WILL BE ASSIGNED (MUST BE IDENTICAL TO NAME APPEARING ON BOND) FED I.D. AND/OR SOCIAL SECURITY NUMBER

Email address: _____

STREET CITY STATE ZIP TELEPHONE

PRESIDENT, PARTNER, OR EMPLOYEE NAME (PRINT OR TYPE) SIGNATURE

HOME ADDRESS CITY STATE ZIP TELEPHONE

VICE-PRESIDENT, PARTNER, OR EMPLOYEE NAME (PRINT OR TYPE) SIGNATURE

HOME ADDRESS CITY STATE ZIP TELEPHONE

TREASURER, PARTNER, OR EMPLOYEE NAME (PRINT OR TYPE) SIGNATURE

HOME ADDRESS CITY STATE ZIP TELEPHONE

SECRETARY, PARTNER, OR EMPLOYEE NAME (PRINT OR TYPE) SIGNATURE

HOME ADDRESS CITY STATE ZIP TELEPHONE

TREASURER, PARTNER, OR EMPLOYEE NAME (PRINT OR TYPE) SIGNATURE

HOME ADDRESS CITY STATE ZIP TELEPHONE

OTHER OFFICER, PARTNER, OR EMPLOYEE NAME (PRINT OR TYPE) SIGNATURE

HOME ADDRESS CITY STATE ZIP TELEPHONE

The following individual requests a Contrator license/registration be assigned to the above business, and hereby assigns the rights of that license/registration.

TYPE OF TRADE LICENSE/REGISTRATION # LICENSE/REGISTRATION HOLDER SIGNATURE & POSITION HELD IN COMPANY

Sworn to before me and subscribed in my presence this _____ day of _____, in the year _____

NOTARY PUBLIC SIGNATURE MY COMMISSION EXPIRES

Notary Seal Here